

J-MART MOTOR PTE LTD

Block 5, Defu Lane 10, #01-578,
Defu Industrial Park C, Singapore 539186
Tel : 6343-0934 Fax : 6343-0921
Email : jmartauto@gmail.com
Registration No: 201400246D
GST Reg. No: 201400246D

RE : estimate cost for vehicle no : SLL 7181J

Bal brought forward:	\$	17,262.10	
	less 25%	4,315.53	
		<u>12,946.58</u>	
1 pc fit rh tyre		400.00	snett
1 pc rear rh tyre		400.00	
1 pc rear w/screen gum		50.00	
Panel beating.		1,500.00	
Spray painting.		1,800.00	
Transfer 2 doors parts.		160.00	
Alignment.		80.00	
Undercarriage.		400.00	
Remove & refit rear w/screen.		120.00	
Upholstery.		120.00	
Rust proofing.		80.00	
		<u>18,056.58</u>	
	Plus 7% GST	1,263.96	
		<u>19,320.54</u>	

SD : Nineteen thousand three hundred twenty & cents fifty-four only.

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5-Sep-22

Our ref : TP/5160/22

Sng Lihui

RE : estimate cost for vehicle no : SLL 7181J

1 pc	frt rh fender	\$	781.20
1 pc	frt rh fender VVT-I emblem		54.00
1 pc	frt rh fender inner shield		200.90
10 pcs	frt rh fender inner shield clips		50.00
1 pc	frt rh fender inner garnish		108.70
1 pc	frt rh rim		2,190.40
1 pc	frt rh shock sorber		398.10
1 pc	frt rh knuckle arm		521.50
1 pc	frt rh knuckle bearing		120.00
1 pc	frt rh lower arm		608.10
1 pc	frt rh door		1,100.00
2 pcs	frt rh door hinges		162.40
1 pc	frt rh door catch		152.00
1 pc	frt rh door lock		576.50
1 pc	frt rh door rubber		172.40
1 pc	frt rh door sticker		66.10
1 pc	frt rh door trimboard		1,036.00
1 pc	frt rh door speaker		309.90
1 pc	frt rh door outer chrome		149.30
1 pc	frt rh door regulator gear		304.70
1 pc	frt rh door regulator motor		996.60
1 pc	rear rh door		1,079.60
1 pc	rear rh door sticker		61.70
1 pc	rear rh door outer chrome		149.30
1 pc	rear rh door rubber		174.60
1 pc	rear rh door trimboard		805.10
2 pcs	rear rh door hinges		170.00
1 pc	rear rh fender		986.80
1 pc	rear bumper		486.50
1 pc	rear bumper rh mudflap		52.80
1 pc	rear bumper rh retainer		110.50
1 pc	rh door pillar		367.80
1 pc	rh rocker panel		568.20
1 pc	rear rh rim		2,190.40
			<hr/>
			17,262.10

Describe Circumstance of the Accident

I was driving along Blk 18 Block South c/park,
suddenly veh B came out from the parking lot & collided
into my veh RH portion of my car.

Declaration

(We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

Driver's Signature (if driver is not the policyholder) / Date

& Time 03/09/22 12.20 pm

[Signature]

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

5. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

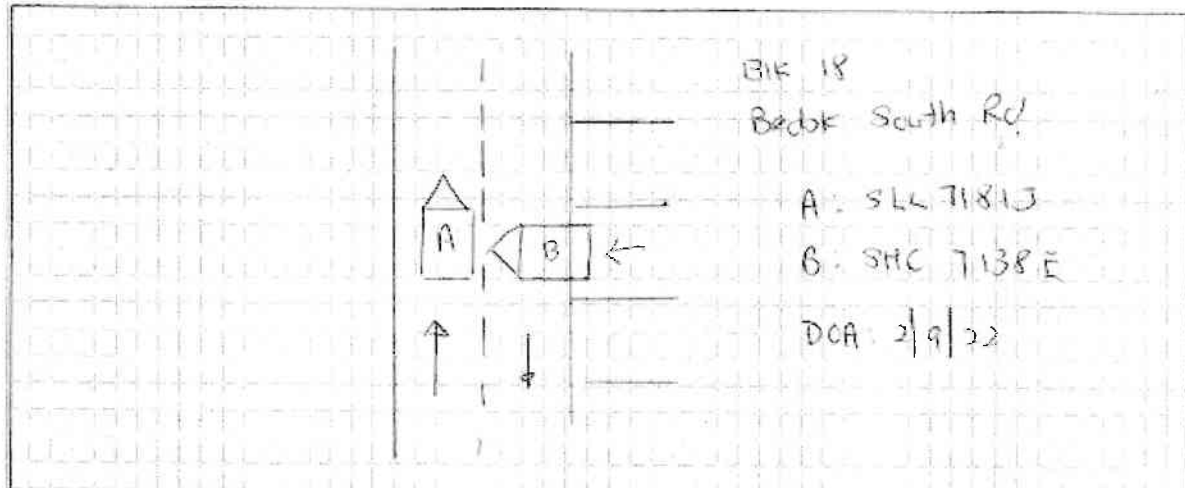
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all Insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature]
Policyholder's Signature / Date & Time

[Signature]
Driver's Signature (if driver is not the policyholder) / Date & Time
03/09/22 1220 pm

[Signature]
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



NRIC No	S1187392H
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

Date Of Driving Pass	11/10/1980
Driving experience	41 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94576711
Alt. Phone Number	-
Email Address	fookchong.sng@gmail.com
Address	BLK 140 BEDOK NORTH STREET 2 #14-200
Address complement	-
Postcode	460140
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I was driving along Blk 18 Bedok South carpark, suddenly veh B came out from the parking lot & collided onto my veh RH portion of my car

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7138E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	ONG POH YAM

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	03/09/2022 13:29 (SGT)
Reported by	Driver
Date of Accident	02/09/2022 19:10 (SGT)
Exact Location of Accident	18 Bedok S Rd, Singapore 460018
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL7181J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SNG LIHUI
NRIC No	S9342238D
Email Address	fookchong.sng@gmail.com
Mobile Phone No	(Phone) +65-94576711
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS 1.6 CVT
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5107976317-03

DRIVER

Name of Driver	LEE JECK HWA
NRIC No	S1371480J
Date Of Birth	15/05/1959
Occupation	Indoor